

DEPARTMENT OF BENEFIT PAYMENTS
744 P Street, Sacramento, CA 95814



June 19, 1975

ALL-COUNTY LETTER NO. 75-121

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: Excess Value Home (EVH) Program

REFERENCE:

All-County Letter No. 75-115, dated June 9, 1975, established a standard procedure for SSA referrals to county welfare departments for possible assistance under the EVH Program. This procedure should ensure that persons denied SSI/SSP because of the excess value of their home are properly referred to the county welfare departments for EVH assistance. There are indications, however, that a number of denied SSI/SSP applicants were not properly referred for EVH during the period between January 1, 1974, and the implementation of the referral procedure. We are, therefore, initiating an effort to inform all such persons of the EVH Program and of their right to apply for both current and retroactive benefits. This letter is to describe this effort, and to set forth special procedures for processing these applications. The opportunity for persons to apply for retroactive benefits as provided in this letter will expire on September 30, 1975.

Some affected individuals received written or formal notice from SSA advising them of their ineligibility for SSI/SSP because of excess resources. Others were advised informally that they did not qualify. Formally denied applicants are identifiable through the State Data Exchange (SDX) system. Informally denied persons are not readily identifiable, so they must be reached through other means. The following steps will be taken to reach both groups of people.

Publicity

A publicity campaign will be conducted to reach those persons who were informally denied SSI/SSP. Public service announcements and news releases will be provided to the mass media, Legal Aid Foundations, Welfare Rights Organizations, County Welfare Departments, and other concerned organizations.

OBSOLETE

Superseded by ACL #77-15
Issued 3-17-77

This publicity will explain the circumstances under which affected individuals may be retroactively eligible for EVH benefits since as early as January 1, 1974, and will set forth how these individuals should go about establishing their eligibility. The publicity is scheduled to begin approximately 10 days after the issuance of this letter.

Individual Notification

By approximately August 1, 1975, the State will have identified through the SDX persons who have been formally denied SSI/SSP on the basis of excess resources. These persons will be sent a notice from the state explaining that if they were denied SSI/SSP because the market value of their home is in excess of \$25,000, they may be eligible for EVH benefits retroactive to the date of their SSI application. They will be advised to contact their local county welfare department to apply for EVH benefits. The Department of Benefit Payments will furnish counties with computer listings of persons in their county who were sent the individual notices.

Determination of Eligibility

Recipients applying as a result of this effort will contact the county welfare departments directly. The CWD must establish the first possible date of eligibility and determine eligibility for all intervening months. If it appears that the determination of retroactive eligibility will take some time, the county should determine current eligibility and begin payment to those found eligible, and then proceed with the determination of the retroactive eligibility.

Beginning Date of Aid

Where the applicant's eligibility for SSI is informally determined by SSA, no documentation of the application or its rejection is maintained. For these cases, counties shall use the attached form affidavits (SSP-20) to establish the date upon which they initially went to SSA to apply for SSI benefits. This date shall be used to determine the beginning date of EVH benefits to all such eligible individuals unless the county has documented evidence to the contrary. The Department of Benefit Payments will send counties a supply of these forms prior to the beginning of the publicity campaign.

Where the applicants for SSI/SSP were formally denied, the counties shall use the computer listing mentioned above to establish the first possible beginning date of aid, if the listings are available when the individual applies for the retroactive benefits. If the listings are not available, the county shall allow the individual to establish his beginning date of aid by affidavit as described above.

Reporting Mechanism

In addition to completing the regular "Adult Program Monthly Statistical Report" (Form ABD 216), counties will attach a second Form ABD 216, and label it "Special EVH Report". For the special EVH report, complete only Items 11 through 15 of Part C of the Form ABD 216 using the current ABD 216 reporting instructions. The report will provide for a special reporting of the number of applications and their disposition resulting from the publicity or individual notification as described in this letter. The data reported on this special report must also be included in the regular ABD 216 report for the same report month.

The first special EVH report will be for the month of June 1975, if applicable, and the due date will be the same as for the regular ABD 216 report. The report will continue until determination is made of the disposition of all applications for retroactive EVH benefits from persons who were denied SSI/SSP and were not properly referred for EVH assistance during the period between January 1, 1974, and implementation of the referral procedure.

If you have any questions or need further information, please contact the Adult Program Management Branch at (916) 445-0813.

Sincerely,



DENNIS O. FLATT
Deputy Director

cc: CWDA

Attachment

AFFIDAVIT

1. I, _____, living at _____
(NAME) (ADDRESS)
_____, declare that I applied for or inquired about SSI/SSP benefits at the
_____. Social Security Administration District Office in _____.
(DISTRICT OFFICE) (MONTH/YEAR)

2. I also declare that I was denied or told that I did not qualify for SSI/SSP benefits, AND

3. I did not apply for "Excess Value Home" assistance for the following reason(s):

PLEASE CHECK APPROPRIATE BOX(S) BELOW.

☐ The Social Security Administration did not advise me to contact the County Welfare Department to apply for Excess Value Home Assistance.

☐ The County Welfare Department did not accept my application for Excess Value Home Assistance.

I DECLARE UNDER THE PENALTY OF PERJURY THAT THE ABOVE IS TRUE AND CORRECT.

(APPLICANT NAME)

(DATE)

Under the provisions of Section 12152 of the Welfare and Institutions Code, I hereby request to apply for EVH assistance and, if found eligible, to receive payments retroactive to the first day of the month in which I initially contacted the Social Security Administration.

(APPLICANT NAME)

(DATE)

* If recipient signs form with a mark, the signature must have two (?) witnesses who provide their signature, address, and the date on the reverse.

DEPARTMENT OF BENEFIT PAYMENTS

744 P Street, Sacramento, CA 95814



June 17, 1975

ALL-COUNTY LETTER NO. 75-120

TO: ALL COUNTY WELFARE DEPARTMENTS

SUBJECT: REVISION TO FORM DFA 296, "FOOD STAMP PROGRAM MONTHLY
STATISTICAL REPORT"

REFERENCE:

To assist counties in the preparation of the Food Stamp Program Monthly Statistical Report (Form DFA 296), revisions have been made to the report instructions clarifying the definitions and expanding instructions for the reporting of specific items. Also, as guides to the proper reporting of required data, specific examples have been included in the instructions.

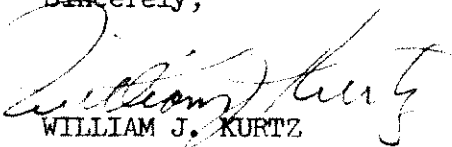
Certain modifications have been made to the report form. Columns have been added to Part A., "New Application Processing," for reporting PA (public assistance) and NA (nonassistance) counts for each item, separately, as well as for reporting counts for both classifications combined.

In Part B., "Certified Caseload Movement," Item 7., Cases added during month now includes an additional category, "Other approvals," (Item 7.d.).

Attached are copies of the revised form and instructions which will be effective for the report month of June 1975, and due July 20, 1975. Additional forms should be ordered through regular channels.

Questions should be directed to the Program Information Bureau at (916) 322-2230 or (ATSS) 492-2230.

Sincerely,


WILLIAM J. KURTZ
Deputy Director

Attachments

cc: CWDA

OBSOLETESuperseded by ACL # 77-15Issued 3-17-77